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CORPORATION DIVISION

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)  
**Laura Hult, Esq. (614) 462-1109**

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Ice Miller LLP  
250 West Street, Suite 700  
Columbus, Ohio 43017**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad).

1a. ORGANIZATION'S NAME  
**Infomotion Sports Technologies, Inc.**

OR  
1b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX   
1c. MAILING ADDRESS  CITY  STATE  POSTAL CODE  COUNTRY   
**6625 Dublin Center Drive** **Dublin** **OH** **43017** **USA**

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad).

2a. ORGANIZATION'S NAME   
OR  
2b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX   
2c. MAILING ADDRESS  CITY  STATE  POSTAL CODE  COUNTRY   
**Verbance** **David** **OH** **43213** **USA**

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)  
3a. ORGANIZATION'S NAME   
OR  
3b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX   
3c. MAILING ADDRESS  CITY  STATE  POSTAL CODE  COUNTRY   
**1025 Urlin Avenue** **Columbus** **OH** **43213** **USA**

4. COLLATERAL: This financing statement covers the following collateral:

**All assets of the Debtor, now existing or hereafter acquired, and all proceeds and products thereof.**

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility  Agricultural Lien  Non-UCC filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessor/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailee  Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

**Filed with Massachusetts Secretary of State**

**889309-2**